## 09/14/2006 15:49

## Image# NOTIFICATION OF MULTICANDIDATE STATUS

( See reverse side for instructions ) This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL HARVEST PAC (b) Number and Street Address 236 MASSACHUSETTS AVENUE NE #508 2. FEC IDENTIFICATION NUMBER C00415869 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) ☐ STATE PARTY WASHINGTON DC 20002 I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: -FEC Identification Number: STATUS BY QUALIFICATION: 5. (a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Office Sought State/District Name Date (i) JOSEPH HEATH SHULER NC House 11 09/12/2006 (ii) JIM MARSHALL 06/28/2006 House GΑ 80 (iii) **BARON P HILL** House IN 09 06/28/2006 (iv) JAMES DAVID MATHESON UT 06/28/2006 House 02 (v) KENNETH RAY LUCAS House 04 06/28/2006 (b) Contributors: The committee received a contribution from its 51st contributor 09/14/2006 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 10/05/2005 (d) Qualification: The committee met the above requirements on: I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER SIGNATURE OF TREASURER DATE Electronically Filed by Eleanor B. Hawkins 09/14/2006 Eleanor B. Hawkins

For further information contact: Federal Election Commission, Washington, DC 20463 Toll-free 800-424-9530 Local 202-694-1100

Note: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

FEC FORM 1 M